



MISSOURI DEPARTMENT OF HEALTH  
STATE PUBLIC HEALTH LABORATORY  
DATAMASTER MAINTENANCE REPORT

Complete this report in duplicate at the time of the regular monthly preventive maintenance check, and whenever instrument is repaired. Send copy to Department of Health; retain original in department file.

DATAMASTER SN	Lake Clark 950109	DATE OF INSPECTION	02/28/2010
LOCATION OF INSTRUMENT (STREET AND CITY)	3162 Bagnell Dam Blvd, 65049, Lake Clark	TIME OF INSPECTION	0918

CHECKLIST: Place a check (✓) to the left of each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unchecked items must be corrected before using instrument.

<input checked="" type="checkbox"/> DIAGNOSTIC CHECK (PRINTOUT ATTACHED) OK	
<input checked="" type="checkbox"/> COMPUTER	<input checked="" type="checkbox"/> DETECTOR
<input checked="" type="checkbox"/> PROGRAM	<input checked="" type="checkbox"/> FILTERS
<input checked="" type="checkbox"/> HEATERS SAMPLE CHAMBER 50 °C	<input checked="" type="checkbox"/> QUARTZ STANDARD
<input checked="" type="checkbox"/> FLOW DETECTOR	<input checked="" type="checkbox"/> CALIBRATION
<input checked="" type="checkbox"/> PUMP HIGH SPEED	<input checked="" type="checkbox"/> PRINTER
<input checked="" type="checkbox"/> INDICATOR LIGHTS	
<input checked="" type="checkbox"/> TIME AND DATE	
<input checked="" type="checkbox"/> SIMULATOR TEMPERATURE (34 °C ± 0.2°C) 34.0 °C	

<input checked="" type="checkbox"/> CALIBRATION CHECK - OK
Run three tests using a standard solution. All three tests must be within ± 5% of the standard value and must have a spread of .005 or less. Check the box corresponding to the standard solution being used. (PRINTOUT ATTACHED) (USE RECIRCULATION PUMP)
<input checked="" type="checkbox"/> 0.100% STANDARD - MUST READ BETWEEN 0.095% and 0.105% INCLUSIVE
<input type="checkbox"/> 0.040% STANDARD - MUST READ BETWEEN 0.038% and 0.042% INCLUSIVE
(ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

TEST 1 █ 0.095 %, TEST 2 █ 0.096 %, TEST 3 █ 0.097 %

<input checked="" type="checkbox"/> PERFORM R.F.I. TEST (PRINTOUT ATTACHED) OK
<input checked="" type="checkbox"/> NUMBER OF REFUSALS, SINCE LAST MAINTENANCE REPORT, AND NUMBER OF BREATH TESTS IN EACH RANGE AS FOLLOWS: (DO NOT INCLUDE SIMULATOR TESTS)
REFUSALS 2   (0-.04) 0   (.05-.09)   (.10-.14)   (.15-.19) 0   (Over .19) 1

List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary)

Instrument is operating within MODHSS guidelines.  
Guth .10 / 09d70 / 09/23/10

INSPECTING OFFICER	
SIGNATURE	PRINT NAME
►	Jeff Skinner
TYPE II PERMIT NUMBER/EXPIRATION DATE	TELEPHONE NUMBER
820291 / 10/03/10	(573) 365-5371, ext 55



**GUTH LABORATORIES, INC.**  
690 NORTH 67th STREET • HARRISBURG, PA 17111-4511 • TELEPHONE: 717-564-5470

### CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number **09270** of  
Alcohol Reference Solution for Simulator were analyzed by  
gas chromatography and found to contain **0.1207** percent  
(w/vol) ethyl alcohol. The expiration date for this lot  
number is September 23, 2010 at 11:59 PM.

When used in a calibrated Simulator, operating at  
 $34^{\circ}\text{C} \pm .2^{\circ}\text{C}$ , this solution will give a breath alcohol  
analysis instrument reading of **0.10** percent BAC.

The alcohol and water used in this solution were  
free of test interfering substances.



Ted L. Pauley  
GUTH LABORATORIES, INC.



**BAC DataMaster**  
**Evidence Ticket**

STATE OF MISSOURI  
LINE OZARK POLICE DEPARTMENT  
BAC DATAMASTER SERIAL NUMBER 958109  
32/23/10

ARREST TIME: 08:32

SUBJECT NAME:

TEST/TEST

ID# 6116755

SEX: M

STATE/CDL # MO123456789

ARRESTING OFFICER:

SKINNER, JEFF

OFFICER I.D.: 712

TESTING OFFICER:

NAME

OFFICER I.D.: SMC

PERMIT NUMBER: 9580291

EXPIRATION DATE: 10/03/13

MISCELLANEOUS INFO:

--- BREATH ANALYSIS ---

BLANK TEST	.000	VERIFIED	.000
INTERFERENT SAMPLE			
SUBJECT SAMPLE	.000		
BLANK TEST	.000		

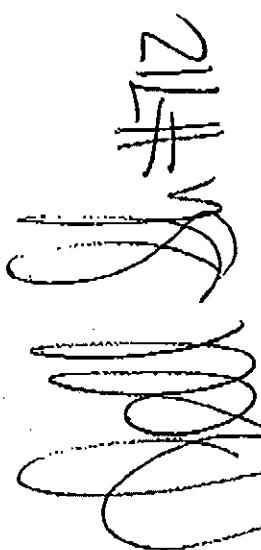
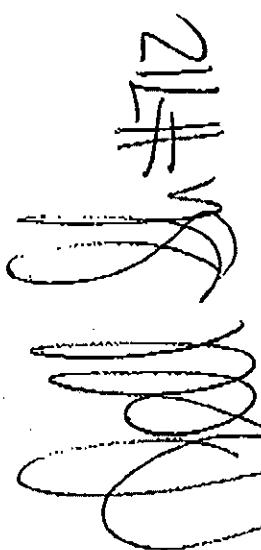
BLANK TEST	.000	VERIFIED	.000
INTERFERENT SAMPLE			
RAPID INTERFERENCE			

--- BREATH ANALYSIS ---

BLANK TEST	.000	VERIFIED	.000
INTERFERENT SAMPLE			
RAPID INTERFERENCE			

BLANK TEST	.000	VERIFIED	.000
INTERFERENT SAMPLE			
RAPID INTERFERENCE			

X 4 seconds ✓

Operator Signature

Operator Signature

State of Missouri  
DEPARTMENT OF HEALTH



P E R M I T  
TYPE II

JEFFREY E. SKINNER

Is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):  
**DATAMASTER**

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

Date 10/03/08

Number 820291

Expires 10/03/2010

MO 500-0771 (7-85)

John J. Mathewson

Director of State Public Health Laboratory

Director, Department of Health

LJL 4-20-09